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CONFIRMATION NO. 9794

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RULE				

## APPLICANTS

Kevin P. Baker, Darnestown, MD;  
David Botstein, Belmont, CA;  
Luc Desnoyers, San Francisco, CA;  
Dan L. Eaton, San Rafael, CA;  
Napoleone Ferrara, San Francisco, CA;  
Sherman Fong, Alameda, CA;  
Wei-Qiang Gao, Palo Alto, CA;  
Audrey Goddard, San Francisco, CA;  
Paul J. Godowski, Hillsborough, CA;  
J. Christopher Grimaldi, San Francisco, CA;  
Austin L. Gurney, Belmont, CA;  
Kenneth J. Hillan, San Francisco, CA;  
James Pan, Belmont, CA;  
Nicholas F. Paoni, Belmont, CA;  
Margaret Ann Roy, San Francisco, CA;  
Victoria Smith, Burlingame, CA;  
Timothy A. Stewart, San Francisco, CA;  
Daniel Tumas, Orinda, CA;  
Colin K. Watanabe, Moraga, CA;  
P. Mickey Williams, Half Moon Bay, CA;  
William I. Wood, Hillsborough, CA;

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CON of 09/946,374 09/04/2001  
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which is a CIP of 09/403,297 10/18/1999 ABN  
which is a 371 of PCT/US99/20111 09/01/1999  
which claims benefit of 60/101,479 09/23/1998

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 02/01/2002

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	MD	249	20	3
Verified and Acknowledged	Examiner's Signature	Initials			

## ADDRESS

35489

## TITLE

PRO 1325 NUCLEIC ACIDS

<p><b>FILING FEE RECEIVED</b> 740</p>	<p>FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:</p>	<table border="1"> <tr> <td><input type="checkbox"/> All Fees</td> </tr> <tr> <td><input type="checkbox"/> 1.16 Fees ( Filing )</td> </tr> <tr> <td><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )</td> </tr> <tr> <td><input type="checkbox"/> 1.18 Fees ( Issue )</td> </tr> <tr> <td><input type="checkbox"/> Other _____</td> </tr> <tr> <td><input type="checkbox"/> Credit</td> </tr> </table>	<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees ( Filing )	<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )	<input type="checkbox"/> 1.18 Fees ( Issue )	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
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